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# NURPD04 Examining Committee Nomination Form

In accordance with the [Postgraduate Research Regulations](https://www.stir.ac.uk/about/professional-services/student-academic-and-corporate-services/academic-registry/regulations/postgraduate-research-regulations/) and [Code of Practice](https://www.stir.ac.uk/about/professional-services/student-academic-and-corporate-services/academic-registry/policy-and-procedure/code-of-practice-research-degrees/) the Programme Director is required to nominate the examining committee.

The completed form should be signed by the Dean of Faculty (or nominee) and Programme Director and submitted to [externalexaminers@stir.ac.uk](mailto:externalexaminers@stir.ac.uk), together with a brief CV from the External Examiner (that must include details of previous examining experience).

This form should be completed when proposing a Committee for the Clinical Doctorate Programme module: Expert Practice (NURPD04) Level 12 (80 credits).

# Candidate & Examination Information

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| **Candidate Full Name:** |  |
| **Student ID:** |  |
| **Provisional Examination Date:** |  |

# Proposed Examining Committee

* 1. **Internal Examiner 1**

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| **Name (Including Title):** |  |
| **Job Title:** |  |

**Details of previous examining experience of research degrees:**

Provide details of the 3 most recent examinations including dates and institutions.

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**2.2 Internal Examiner 2 (if applicable)**

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| **Name (Including Title):** |  |
| **Job Title:** |  |

**Details of previous examining experience of research degrees:**

Provide details of the 3 most recent examinations including dates and institutions.

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**2.3 External Examiner 1**

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| **Name (including title):** |  |
| **Job Title:** |  |
| **Institution:** |  |
| **Email Address:** |  |
| **Contact Phone Number:** |  |
| **Contact Address:** |  |

**Details of previous examining experience of research degrees:**

Provide details of the 3 most recent examinations including dates and institutions.

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| **Does the nominee hold a PhD?** | Choose an item. |

*If no, please provide details below on the individual’s experience and qualifications and how these are appropriate to the level of the qualification being externally examined. Where the individual has extensive practitioner experience this should also be detailed.*

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Provide evidence on how the nominee meets the person specification and the experience in the candidate's field as detailed in the guidelines on the University’s requirements around Taught External Examiner appointments.

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| **Curriculum Vitae** | ​☐​ Please confirm you have provided a brief CV (including details of previous examining experience). ​ |

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| **External Examiner proof of Right to Work**  It is a legal requirement for the University to undertake a Right to Work check for all those working in the UK and the actions we are required to take are dependent upon the person’s immigration status.  Please advise on the following, noting the nominee’s usual residence for work:  Choose an item.  External is a UK/Irish passport holder, working in the UK  External is a non-UK/Irish passport holder, working in the UK  External is a UK/Irish passport holder, working outside of the UK  External is a non-UK/Irish passport holder, working outside of the UK  **IMPORTANT NOTE:** *The thesis can only be released once a Right to Work check has been undertaken. External Examiners will be advised of this in their appointment email and encouraged to send back their acceptance promptly so that this can be facilitated. This does not impact those examiners who are non-UK/Irish passport holders, working outside of the UK.* |

**Declaration of Conflicts of Interest**

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| Is the nominee a member of a governing body or committee of the University of Stirling or one of our collaborative partners, or a current employee of the University of Stirling or one of its collaborative partners? | Choose an item. |
| Is the nominee in a close professional, contractual or personal relationship with a member of staff or student involved with the programme of study? | Choose an item. |
| Is the nominee required to assess colleagues who are recruited as students to the programme of study? | Choose an item. |
| Would the nominee be anyone who is, or knows they will be, in a position to influence significantly the future of students on the programme of study? | Choose an item. |
| Is the nominee anyone significantly involved in recent or current substantive collaborative research activities with a member of staff closely involved in the delivery, management or assessment of the programme(s) or modules in question? | Choose an item. |
| Is the nominee a former member of staff or student of the University of Stirling, if so have at least 5 years elapsed and have all the students taught by or with the External Examiner completed their programme of study? | Choose an item. |
| Is the nominee from a department where a Stirling member of staff is also serving as an External Examiner? | Choose an item. |
| Would the appointment result in the succession of an External Examiner by a colleague from the examiner’s home department and institution? | Choose an item. |
| Would the appointment result in more than one External Examiner from the same department of the same institution being appointed? | Choose an item. |
| Does the nominee serve as a taught external examiner of the University of Stirling? | Choose an item. |
| Does the nominee hold an honorary appointment which renumerations are given from the University of Stirling? | Choose an item. |

***Important Note:*** *If the answer is yes to any of the above then please provide an explanation below as to why an exception should be made to the nomination of this External Examiner.*

*Any concerns regarding a potential conflict of interest should also be provided along with information on arrangements to address this.*

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### 2.4 External Examiner 2 (if applicable)

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| **Name (including title):** |  |
| **Job Title:** |  |
| **Institution:** |  |
| **Email Address:** |  |
| **Contact Phone Number:** |  |
| **Contact Address:** |  |

**Details of previous examining experience of research degrees:**

Provide details of the 3 most recent examinations including dates and institutions.

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| **Does the nominee hold a PhD?** | Choose an item. |

*If no, please provide details below on the individual’s experience and qualifications and how these are appropriate to the level of the qualification being externally examined. Where the individual has extensive practitioner experience this should also be detailed.*

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Provide evidence on how the nominee meets the person specification and the experience in the candidate's field as detailed in the [guidelines](https://www.stir.ac.uk/media/stirling/services/academic-registry/documents/Guidelines-for-the-Appointment-of-Taught-External-Examiners.docx) on the University’s requirements around Taught External Examiner appointments:

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| **Curriculum Vitae** | ​☐​ Please confirm you have provided a brief CV (including details of previous examining experience). ​ |

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**Declaration of Conflicts of Interest**

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| Is the nominee in a close professional, contractual or personal relationship with a member of staff or student involved with the programme of study? | Choose an item. |
| Is the nominee required to assess colleagues who are recruited as students to the programme of study? | Choose an item. |
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| Is the nominee from a department where a Stirling member of staff is also serving as an External Examiner? | Choose an item. |
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| Would the appointment result in more than one External Examiner from the same department of the same institution being appointed? | Choose an item. |
| Does the nominee serve as a taught external examiner of the University of Stirling? | Choose an item. |
| Does the nominee hold an honorary appointment which renumerations are given from the University of Stirling? | Choose an item. |

***Important Note:*** *If the answer is yes to any of the above then please provide an explanation below as to why an exception should be made to the nomination of this External Examiner.*

*Any concerns regarding a potential conflict of interest should also be provided along with information on arrangements to address this.*

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# Faculty Signatures

I can confirm that the information above is accurate and that all of the examiners nominated have confirmed their ability to serve.

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| **Signature:**  **(Programme Director)** | **Date:** |
| **Signature:**  **(Dean of Faculty)** | **Date:** |

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| **Faculty Administrator contact:** |  |

# Academic Quality & Governance Team

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| **Comments:**  **Name:**  **Date:** |